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PATENT APPLICATION FEE DETERMINATION RECORD										33 M displays a valid Ol/13 control númber.			
Substitute for Form PTO-875									Арри	Application or Docket Number			
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MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+\$=		OR	+ \$ E		_	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR	TOTAL	<del> </del>	_	
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If the entry in column 1 is less than the entry in column 2, write "o" in column 3.  If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".										" ii gha "".	i i i i i i i i i i i i i i i i i i i	it.	
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\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

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\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the complete) including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chlef Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS.

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